

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>3/12/2005</u>		2 Serial/Patent # <u>09/778,881</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time		<u>12/17/2004</u>	\$ <u>1,020</u>							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND								
			\$ <u>1,020</u>								
8 TO BE REFUNDED BY:											
		Treasury Check									
		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">0</td> <td style="width: 20px;">8</td> <td style="width: 20px;">8</td> </tr> </table>			5	0	--	1	0	8	8
5	0	--	1	0	8	8					
10 REASON:											
	Overpayment										
	Duplicate Payment										
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<u>EXTENSION WAS FILED TOO LATE.</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>MARIANNE JENKINS</u>		TITLE: <u>PET. EXMR.</u>									
SIGNATURE: <u>Marianne C. Jenkins</u>		PHONE: <u>2-3223</u>									
OFFICE: <u>PETITIONS</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alina Kelle</u>		DATE: <u>3/14/05</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: